



IDAHO DEPARTMENT OF
WATER RESOURCES

Northern Region • 7600 N Mineral Drive, Suite 100 • Coeur D'Alene, ID 83815-7763
Phone: 208-762-2800 • Fax: 208-762-2819 • Email: northerninfo@idwr.idaho.gov • Web: idwr.idaho.gov

Governor Brad Little

Director Mathew Weaver

February 8, 2024

KAY CO COMMUNITY WELL
C/O KATHIE MCGONIGLE 5212 N BLAKE ST
SPOKANE WA 9216

Dear Claimant,

As per our previous phone conversation, I am sending you a Notice of Claim to a Water Right form, which can be utilized to claim the water right license you're your association. For your convenience, I completed much of the claim form for you, utilizing all the information from the existing license. If any changes are made, please be sure to initial those changes before signing the claim form. After your review, please return the signed claim form along with the required **\$66.00** filing fee to our office at the address listed above.

When returning the signed claim form to our office, we will also need you to reference the enclosed map, and clearly indicate which homes are being served by the association's well, how many homes total are being served, and the location of the well.

Finally, if there is any documentation that the association's board can provide to IDWR that officially names Kathie McGonigle as an authorized representative with signature authority, that would be very helpful to receive as well.

Please do not hesitate to contact our office if you have any questions or concerns. We can be reached by phone during business hours at 208-762-2800.

Best Regards,

Greg Cooksey
Senior Water Resource Agent
Northern Region

Enclosures: Prepared Notice of Claim to a Water Right form for Claim No. 96-7843, POU Service Map, How You Will Receive Notices in the Clark Fork-Pend Oreille River Basin Adjudication

**IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO,
IN AND FOR THE COUNTY OF TWIN FALLS**

IN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE CLARK FORK-PEND OREILLE RIVER
BASIN WATER SYSTEM

CIVIL CASE NUMBER: 69576

Ident. Number: 96-7843
Date Received: 2/8/2024
Receipt No:
Claim Fee: \$66.00
Received By: _____

**NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW**

1. Name of Claimant(s)

KAY CO COMMUNITY WELL
C/O KATHIE MCGONIGLE
5212 N BLAKE ST
SPOKANE WA 9216

Phone:

2. Date of Priority: 12/10/1979

3. Source:

GROUND WATER

Trib. to:

4. Point of Diversion:

Township	Range	Section	¼ of ¼ of ¼	Lot	County	Type
55N	02W	5	NE SW		BONNER	

5. Description of diverting works:

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
DOMESTIC	1/01	12/31	0.16		15.6

7. Total Quantity Appropriated is:

0.16 C.F.S. and/or 15.6 A.F.A.

8. Non-irrigation uses:

9. Place of use:

DOMESTIC within BONNER County

Township	Range	Section	¼	of	¼	Lot	Acres
55N	02W	5	NE		SW		
55N	02W	5	SE		SW		

10. Do you own the property listed above as place of use? Yes

If your answer is no, describe in remarks below the authority you have to claim this water right.

11. Other Water Rights Used:

12. Remarks:

Priority Date Explanation:
BASED ON LICENSE

Domestic use is for 13 homes.

13. Basis of Claim: License

14. Signature(s)

(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notice in the CLARK FORK-PEND OREILLE River Basin Adjudication." (b.) I/We do _____ do not _____ wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: _____

For Organizations:

I do solemnly swear or affirm under penalty of perjury that I am, and I have signed the foregoing document in the space below as the

_____ of _____
Agents Title (please print) Name of Organization (please print)

and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____ Date _____

Printed Name of Authorized Agent _____

KAY CO COMMUNITY WELL POU

96-7843 PARCEL SERVICE MAP

